FEC

STATEMENT OF

FORM 1	ORGANIZ	ATION		
. •	(See instructi	ions)		Office use only
NAME OF COMMITTEE (in f	ull) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	1 1
National Assoc	ciation of Shareholder & Consu	mer Attorneys PAC	11111	
ADDRESS (number and s	c/o Lockridge Grine	dal Nauen PLLP	11111	
(Check if address	100 Washington Av	re, Sputh, #2200	11111	11111111
X is changed)	Minneapolis		MN	55401 -
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAII	L ADDRESS (Please provide only one			
(Check if address is changed)	PLGroup@perkinso	coie.com		
is smanges,				
COMMITTEE'S WEB F	PAGE ADDRESS (URL)			
(Check if address			11111	
is changed)				
2. DATE 0.5	/ D D / Y Y Y Y Y D D D D D D D D D D D			
3. FEC IDENTIFICA	TION NUMBER	C C00236687		
A ICTUIC CTATEM	ENT NEW (A)			
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)		
I certify that I have examin	ned this Statement and to the best of my kr	nowledge and belief it is true, correct	and complete	
	Francurer Karen H. Riebe	•		
Type or Print Name of	FreasurerKaren n. Niebe	1		
Signature of Treasurer	Electronically Filed by Karen H.	Riebel	Date 0,5	05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fals	se, erroneous, or incomplete information m	ay subject the person signing this S	•	
0,,,,	ANT OFFANGE IN INFORM			
Office Use Only		For further information Federal Election Communication Toll Free 800-424-9530	nission	FEC FORM 1 (Revised 02/2009)

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	COMMITTEE (Check One) Committee:						
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	This committee is a principal campaign committee. (Complete the candidate information below.)					
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	he candidate					
Name of Candidate							
Candidate Party Affilia	tion Office Sought: House Senate President	State District					
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate							
Party Com							
(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.					
Political A	ction Committee (PAC):						
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization							
	Corporation Corporation w/o Capital Stock La	bor Organization					
	Membership Organization X Trade Association C	ooperative					
	In addition, this committee is a Lobbyist/Registrant PAC.						
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d fund or party					
	In addition, this committee is a Lobbyist/Registrant PAC.						
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Joint Fundi	raising Representative:						
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political					
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political					
Cor	nmittees Participating in Joint Fundraiser						
	1. FEC ID number						
	2. FEC ID number						
	3. FEC ID number						
	FEC ID number						

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Write	or Type Committee Name				
Na	ational Association of	Shareholder & Consumer Atto	rneys PAC		
6. Na	me of Any Connected Org	anization, Affiliated Committee, Joi	nt Fundraising Representative, or L	eadership PAC Sponsor	
Na	tional Association of S	hareholder & Consumer Attor	neys		
Ma	ailing Address	c/o Lockridge Grindal Nauen PLLP			
		100 Washington Ave. South, #2200			
		Minneapolis	МИ	55401	
		CITY	STATE ▲	ZIP CODE	
Re	elationship:				
X	Connected Organization	Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor	
ро	ssession of Committee		number optional), and position	of the person in	
Ма	ailing Address	c/o Lockridge Gri	ndal Nauen PLLP		
	Ü	100 Washington A	ve. South, #2200		
		Minneapolis	MN	55401	
Titl	le or Position ♥	CITY A	STATE	ZIP CODE A	
	Treasurer		Telephone number		
na Fu	ame and address of any	and address (phone number op designated agent (e.g., assistan	otional) of the treasurer of the cot treasurer).	mmittee; and the	
Ma	ailing Address	c/o Lockridge Gri	ndal Nauen PLLP		
.71	3	100 Washington A	Ave. South, #2200		
		Minneapolis	MN	55401 _	
Tit	tle or Position ♥	CITY A	STATE.	ZIP CODE A	
	Treasurer		Telephone number		

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Full Name of Designated Agent				
Mailing Address				
Title or Position ▼	CITY A	STATE ▲	ZIP CODE A	
		elephone number		
9. Banks or Other Depos safety deposit boxes or Name of Bank, Deposite	maintains funds.	ne committee deposits funds, ho	lds accounts, rents	
	Vells Fargo			
Mailing Address	12 East 49th Street, 45th Floor			
	New York	NY	10017	
	CITY 🗖	STATE △	ZIP CODE 🛕	
Name of Bank, Deposite	ory, etc.			
L				
Mailing Address				
	CITY 🙇	STATE. △	ZIP CODE 🛕	